BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
APPLICANT(S)	

CLAIMS

	AS FILED			AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
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TOTAL	57	``				

^{*}MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS